

## Softshell Clam Transplant Permit Application

### REQUIREMENTS FOR TRANSPLANTING CLAMS WITHIN THE MUNICIPAL SHELLFISH PROGRAM

A community must have a permit from the Maine Department of Marine Resources (DMR) to possess undersized soft shell clams (*Mya arenaria*). This permit will allow the municipality to possess sub legal clams for the purpose of reseeded shellfish areas. Without such a permit, the diggers may be in violation of state law.

**The following guidelines should be followed while transplanting clams from all sources:**

- 1) The activity will take place during daylight hours.
- 2) The activity will take place on designated days.
- 3) The activity should take place under the supervision of the town's shellfish officer or a designee of the Shellfish Committee.

**The following guidelines must be followed when taking seed clams from a Closed or Restricted area.**

- 1) All clams harvested must be less than 1.5" in the longest diameter. This is a no tolerance policy.
- 2) The harvest area must be marked by orange flags.
- 3) There must be a designated landing point for product that is included in the application.
- 4) During harvesting activities, harvest crew diggers shall remain in the same area, close enough for immediate supervision of all diggers at all times by the representative of the shellfish committee. The period of harvesting activity will be considered the time from which the names of the diggers are taken by the representative of the shellfish committee until the clams are landed at the designated landing point.
- 5) The method and route of the transportation of product to the receiving area must be submitted to DMR at the time of application.

**NOTE: Areas seeded with clams taken from Depuration or Prohibited (Closed) areas must be closed for a period of at least 6 months.**

## Softshell Clam Transplant Permit Application

### PROCEDURE

In order to obtain a permit the Shellfish Conservation Committee (SFC) must do the following:

1. Fill out the attached application
2. Send the completed form, at least a week prior to the requested date, to:

Commissioner, Dept. of Marine Resources  
21 State House Station  
Augusta, Me 04333-0021
3. Marine Patrol in either W. Boothbay Harbor at Division I (207-633- 9595) or Lamoine at Division II (207-667-3373) must be notified on the morning of the activity, or if the activity is initiated prior to the start of the normal business day or occurring on a weekend, the previous business day, of the following:
  - A) The name of the supervisor
  - B) The area of the activity
    - i) The name of the supervisor
    - ii) The number of diggers involved
    - iii) The area of the activity
4. **The supervisor of the activity will have in his possession a copy of the permit from the Department for the activity and a list of names of diggers involved.**
5. Questions and comments should be addressed to the following:

#### **York, Cumberland and Sagadahoc Counties**

Donald Card                                      Telephone: 207-443-6559  
HCR 32 Box 252  
W. Bath, ME 04530

#### **Lincoln, Knox and Waldo Counties**

Ron Aho    Telephone: 207-586-5572  
118 Kings Highway  
Newcastle, ME 04553

#### **Hancock and Washington Counties**

David Clifford                                      Telephone: 207-255-3926  
P.O. Box 37  
E. Machias, ME 04630

## Softshell Clam Transplant Permit Application

Date of Application: \_\_\_\_\_

To: Commissioner, Department of Marine Resources  
21 State House Station  
Augusta, ME 04333-0021

FROM: The town of \_\_\_\_\_ requests a permit to possess under  
sized clams for the purpose of transplanting.

Contact Person for the town:

Name \_\_\_\_\_ Title \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax: \_\_\_\_\_

Please answer the following:

1. Who will be the supervisor of seeding operation? \_\_\_\_\_  
Title \_\_\_\_\_ Telephone # \_\_\_\_\_ Fax#: \_\_\_\_\_
2. What is the source of seed clams? (Please mark one)  
Natural \_\_\_\_\_ Hatchery \_\_\_\_\_  
Other \_\_\_\_\_ - Describe: \_\_\_\_\_
3. Please name the source area and attach a map showing the source area.  
Name of Source Area: \_\_\_\_\_
4. Please indicate the State classification of the seed source area:  
Approved (Open) \_\_\_\_\_ (Go to #5)  
Prohibited (Closed) \_\_\_\_\_ (Go to #11)  
Restricted (Depuration) \_\_\_\_\_ (Go to #11)
5. What day and time will the seed clams be harvested? Date: \_\_\_\_\_ Time: \_\_\_\_\_
6. What is the destination of seed clams? (Please attach a map of the area)  
Destination Name: \_\_\_\_\_
7. What day and time will the seed clams be planted? Date: \_\_\_\_\_ Time: \_\_\_\_\_
8. How will the success of this project be monitored?
9. Is the seeded area being closed to harvest of clams?
10. Are predator controls being used? \_\_\_\_\_ If yes please describe:

## Softshell Clam Transplant Permit Application

**If Hatchery seed or Open area clams are used, no further questions need to be answered. If Closed Area clams are used, please go to #11.**

### **CLOSED/RESTRICTED AREA SOURCE SEED CLAMS**

#### **PLEASE NOTE:**

**CLOSED/RESTRICTED HARVEST AREA MUST  
BE MARKED BY ORANGE FLAGS**

11. What day and time will the seed clams be harvested? Date: \_\_\_\_\_ Time: \_\_\_\_\_
12. What is the destination of seed clams? (Please attach a map of the area)  
\_\_\_\_\_
13. How will the seed clams be moved to the planting site? \_\_\_\_\_
14. If seed clams are transported by car, where will the clams be landed? (please note that clams from Closed and Restricted areas must be planted immediately. No storage is allowed)
15. What day and time will the seed clams be planted? Date: \_\_\_\_\_ Time: \_\_\_\_\_
16. How will the success of this project be monitored? \_\_\_\_\_
17. Is the seeded area being closed to harvest of clams?

**NOTE: Areas seeded with clams taken from Depuration or Prohibited (Closed) areas must be closed for a period of at least 6 months.**

18. Are predator controls being used? \_\_\_\_\_ If yes please describe: